

Determining Learning Needs

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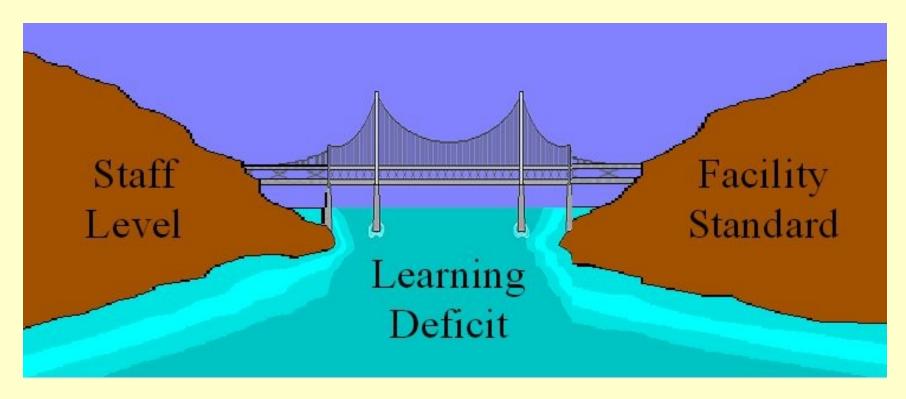
Introduction

- 1. Given student handouts, individuals will be able to discuss the necessity for a learning needs assessment to the instructor's satisfaction.
- 2. Given simulated situations, individuals will determine if a learning need exists to the instructor's satisfaction.

Learning Need

"Discrepancy between the actual performance and the desired or optimal performance level. Gap between present level of competency and higher level required for effective performance."

Avillion, A. E. (Ed) (2001). *Core Curriculum for Staff Development* (2nd ed.). Pensacola, Florida: National Nursing Staff Development Organization (p 195)



What the staff know.

What the staff should know.

Learning Needs Assessment

"A process to investigate, validate, and communicate learning needs."

Avillion, A. E. (Ed) (2001) (p 195)

The means of determining the staff members' competency level versus the health care standards.

Real Needs – actual discrepancy exists, job performance oriented

Felt Needs – actual discrepancy exists, individual goal oriented

Educational Needs – actual discrepancy exists, satisfied by participation in educational activities

Managerial Need – actual discrepancy exists, satisfied by management actions to remedy situation

Data Collection Process



- Obtain/Generation of referral
 - Determine your audience
- Identify standard(s)
 - Determine collection methods
 - Collect data

Data Collection Process

Analyze the data

Prioritize learning n eeds

- Develop cost estimates
- Inform leadership
- Plan the program





Observation

Surveys Or Questionnaires





Interviews

Advisory Groups





Pre-test/Posttest

Application to AFF 2661

The following information will be considered when reviewing an educational offering for approval. Documentation will be attached in the form of AF Forms 2662 and 2663, course announcements, and other relevant materials.

1. DETERMINATION OF LEARNING NEED (How did you determine the need for this offering?)

In a review of incident reports for the month of March 2003 a trend was noted by the Quality Improvement Committee, that the Observation Unit had an increase in patient falls. The units policies and procedures were reviewed and were in-line with Medical Group and professional standards. Observation of unit operations demonstrated a large turn-over of staff had occurred who were not operating IAW those policies. During verbal interviews, new staff denied being aware of the units policies concerning fall prevention procedures. A date and time was selected by the staff, and the GETO and unit management will present unit policies and procedures to meet the

2 1 @ EFERING ON FOLK BY Of the summary of major context to be presented

Conclusion

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